

Appendix C : Patient and Provider Satisfaction Across Included Studies

Author	Pre-Implementation Patient Satisfaction	Post-Implementation Patient Satisfaction	Pre-Implementation Provider Satisfaction	Post-Implementation Provider Satisfaction
MacLeod et al. ¹	N/A	Improves patient satisfaction	N/A	N/A
Van den Heuvel et al. ²	N/A	78.3% (two-thirds) of patients felt that service was faster in specialized centre, 88.6% of patients felt that service was better in specialized centre. Importance of same surgeon in group 1 (same surgeon for assessment and surgery):98.4%, in group 2 group (different surgeon for assessment and surgery):48.3%. Confidence in operating surgeon (group 1: 100%; group 2: 86.2%)	N/A	N/A
Hazlewood et al. ³	N/A	N/A	Rheumatologists: 1/3 rated referrals poor quality, 1/3 rated referrals moderate. 75% of rheumatologists were not satisfied with completeness of information provided by referring physician	Rheumatologists: 72% rated referral quality as moderate, 9% rated referral quality as high. Completeness of information: moderate in 68% of referrals, high in 19% of referrals
Wittmeier et al. ⁴	96.6% satisfaction	98% satisfaction	N/A	N/A

* The following were not included because they did not provide any information on the categories of interest: Leach et al., Bichel et al., Bungard et al., Schacter et al., Clark et al., and Goodsall et al.^{5,6,7,8,9,10}

Reference List

1. Macleod AM, Gollish J, Kennedy D, et al. Toward a joint health and disease management program. Toronto hospitals partner to provide system leadership. *Healthc Q* 2009;12:56-65.
2. van den Heuvel B, Vair B, Porter G, et al. Patient compliance with a group model of care: the hernia clinic. *Can J Surg* 2012;55:259-63.
3. Hazlewood G, Lupton T, Martin L, et al. The impact of a centralized referral system in rheumatology. *J Rheumatol* 2010;37:1288-9.
4. Wittmeier KDM, Restall G, Mulder K, et al. Central intake to improve access to physiotherapy for children with complex needs: a mixed methods case report. *BMC Health Serv Res* 2016;16:455.
5. Leach P, Rutherford SA, King AT, et al. Generic waiting lists for routine spinal surgery. *J R Soc Med* 2004;97:119-20.
6. Bichel A, Erle S, Wiebe V, et al. Improving patient access to medical services: preventing the patient from being lost in translation. *Healthc Q* 2009;13:61-8.
7. Bungard TJ, Smigrowsky MJ, Lalonde LD, et al. Cardiac EASE (Ensuring Access and Speedy Evaluation): the impact of a single-point-of-entry multi-disciplinary outpatient cardiology consultation program on wait times in Canada. *Can J Cardiol* 2009;25:697-702.
8. Schacter ME, Romann A, Djurdev O, et al. The British Columbia Nephrologists' Access Study (BCNAS): a prospective, health services interventional study to develop waiting time benchmarks and reduce wait times for out-patient nephrology consultations. *BMC Nephrol* 2013;14:182.
9. Clark AJ. Central triage and improving the consultation process for patients with chronic pain [abstract 4A]. In: *Proceedings of the 36th Annual Scientific Meeting of the Canadian Pain Society*; 2015 May 20-23; Charlottetown. *Pain Res Manag* 2015;20:e30.
10. Goodsall TM, Haskins R, Bennetts K, et al. A single-entry model for clinical triaging reduces wait time and improves key performance indicators of service delivery [abstract]. *J Gastroenterol Hepatol* 2017;32(Suppl 2):161.

Appendix 3, as supplied by the authors. Appendix to: Milakovic M, Corrado AM, Tadrous M, et al. Effects of a single-entry intake system on access to outpatient visits to specialist physicians and allied health professionals: a systematic review. *CMAJ Open* 2021. doi:10.9778/cmajo.20200067. Copyright © 2021 The Author(s) or their employer(s).

To receive this resource in an accessible format, please contact us at cmajgroup@cmaj.ca. Appendices are posted as supplied by authors.

